

**Attachment 1**

**Articles of Incorporation**

**Evidence of Authority to Transact Business**

**Form 205**  
**(revised 6/01)**

This space reserved for office use.



Return in Duplicate to:  
Secretary of State  
P.O. Box 13697  
Austin, TX 78711-3697  
FAX: 512/463-5709

**Filing Fee: \$200**

**Articles of Organization**  
**For A**  
**Texas Limited Liability**  
**Company Act**

**Article 1 Name**

The name of the limited liability company is as set forth below:

Symatec Communications, LLC

The name of the entity must contain the words "Limited Liability Company" or "Limited Company," or an accepted abbreviation of such terms. The name must not be the same as, deceptively similar to or similar to that of an existing corporate, limited liability company, or limited partnership name on file with the secretary of state. A preliminary check for "name availability" is recommended.

**Article 2 – Registered Agent and Registered Office (Select and complete either A or B and complete C.)**

☐ A. The initial registered agent is an organization (cannot be company named above) by the name of:

**OR**

☒ B. The initial registered agent is an individual resident of the state whose is set forth below.

First Name	M.I.	Last Name	Suffix
Matthew	N	Simpson	

C. The business address of the registered agent and the registered office address is:

Street Address	City	TX	Zip Code
414 Tara Lane	Red Oak		75154

**Article 3 – Management**

A. ☒ The limited liability company is to be managed by managers. The names and addresses of the initial managers are set forth below:

**OR (Select either option A or option B; do not select both.)**

B. ☐ The limited liability company will not have managers. Management of the company is reserved to the members. The names and addresses of the initial members are set forth below:

**Manager/Member Name and Address Information**

**MANAGER/MEMBER 1**

**LEGAL ENTITY:** The manager/member is a legal entity named:

**INDIVIDUAL:** The manager/member is an individual whose name is set forth below:

First Name	M.I.	Last Name	Suffix
Matthew	N	Simpson	

**ADDRESS OF MANAGER/MEMBER 1:**

Street Address	City	State	Zip Code
414 Tara Lane	Red Oak	TX	75154

**MANAGER/MEMBER 2**

**LEGAL ENTITY:** The manager/member is a legal entity named:

**INDIVIDUAL:** The manager/member is an individual whose name is set forth below.

First Name	M.I.	Last Name	Suffix
ADDRESS OF MANAGER/MEMBER 2:			
Street Address	City	State	Zip Code
MANAGER/MEMBER 3:			
<b>LEGAL ENTITY:</b> The manager/member is a legal entity named:			
<b>INDIVIDUAL:</b> The manager/member is an individual whose name is set forth below.			
First Name	M.I.	Last Name	Suffix
ADDRESS OF MANAGER/MEMBER 3:			
Street Address	City	State	Zip Code
<b>Article 4 – Duration</b>			
The period of duration is perpetual.			
<b>Article 5– Purpose</b>			
The purpose for which the company is organized is for the transaction of any and all lawful business for which limited liability companies may be organized.			
<b>Supplemental Provisions/Information</b>			
Text Area			
[The attached addendum are incorporated herein by reference.]			
<b>Organizer</b>			
The name and address of the organizer is set forth below.			
Name			
Matthew N. Simpson			
Street Address	City	State	Zip Code
414 Tara Lane	Red Oak	TX	75154
<b>Effective Date of Filing</b>			
A. <input checked="" type="checkbox"/> This document will become effective when the document is filed by the secretary of state.			
OR			
B. <input type="checkbox"/> This document will become effective at a later date, which is not more than ninety (90) days from the date of its filing by the secretary of state. The delayed effective date is _____			
<b>Execution</b>			
The undersigned signs this document subject to the penalties imposed by law for the submission of a false or fraudulent document.			
Matthew N. Simpson			
Signature of organizer			



## Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for SYMATEC COMMUNICATIONS, LLC (filing number: 800212215), a Domestic Limited Liability Company (LLC), was filed in this office on June 10, 2003.

It is further certified that the entity status in Texas is active.

It is further certified that our records indicate MATTHEW N SIMPSON as the designated registered agent for the above named corporation and the designated registered office for said corporation is as follows:

414 TARA LANE

RED OAK, TX - 75154 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 01, 2003.



A handwritten signature in cursive script that reads "Gwyn Shea".

Gwyn Shea  
Secretary of state

Form **LLC-45.5**

January 1999

**Jesse White**  
Secretary of State  
Department of Business Services  
Limited Liability Company Division  
Room 359, Howlett Building  
Springfield, IL 62756  
<http://www.sos.state.il.us>

*Payment must be made by certified check, cashier's check, Illinois attorney's C.P.A.'s check or money order, payable to "Secretary of State."*

**Illinois**  
**Limited Liability Company Act**

**Application for Admission to Transact Business**

**Submit in Duplicate**

Must be typewritten

*This space for use by Secretary of State*

Date 11.26.2003  
Assigned File # 0108 2094  
Filing Fee \$400  
Penalty \$  
Approved: JB \$

This space for use by  
Secretary of State

**FILED**

**NOV 26 2003**

**JESSE WHITE**  
**SECRETARY OF STATE**

1. Limited Liability Company name: Symatec Communications, LLC

(Must comply with Section 1-10 of ILLCA or article 2 below applies.)

2. The assumed name, other than the true company name, under which the LLC proposes to transact business in Illinois is: \_\_\_\_\_

(If applicable, a form LLC-1.20, Application to Adopt an Assumed Name, is required to be completed and attached to this application.)

3. Federal Employer Identification Number (F.E.I.N.): 20-0195745

4. Jurisdiction of Organization: Texas

5. Date of Organization: June 10, 2003

6. Period of Duration: perpetual

(See #14 on back)

7. The address, including county, of the office required to be maintained in the jurisdiction of its organization, or if not required, of the principal place of business (Post office box alone and c/o are unacceptable):

414 Tara Lane

(Number)

(Street)

(Suite)

Red Oak, TX

(City/State)

75154

(ZIP Code)

Ellis

(County)

8. Registered agent: Faxxon Legal Information Systems

(First Name)

(Middle Name)

(Last Name)

Registered Office: 1 West Old State Capital Plaza Suite #805

(Number)

(Street)

(Suite #)

(P.O. Box or c/o Springfield

(City)

Sangamon

(County)

Illinois 62701

(ZIP Code)

are unacceptable)

9. The date on which this foreign LLC first did business in Illinois: upon qualification

**LLC-45.5**

10. The purpose or purposes for which the company is organized and proposes to conduct in this State: Include the business code # (IRS Form 1065).

Local dialtone telecommunications services. Business code number #517000


11. The limited liability company is managed by:

☒ manager(s)

☐ vested in member(s)

12. The Illinois Secretary of State is hereby appointed the agent of the limited liability company for service of process under the circumstances set forth in a subsection (b) of Section 1-50 of the ILLCA.
13. This application is accompanied by a certificate of good standing or existence, as well as a copy of the articles of organization, as amended, duly authenticated within the last thirty (30) days, by the officer of the state or country wherein the LLC is formed.
14. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date must also be submitted.
15. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated October 22, 2003  
(Month/Day) (Year)



(Signature)

(Signature must comply with Section 5-45 of ILLCA)

Matthew N. Simpson

Manager

(Type or print name and title)

\_\_\_\_\_  
\*(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

\*Please refer to Sections 178.20(d) and (e) of the Administrative Rules